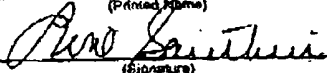


Atty. Dkt. No. 041673-2069

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Thomas J. Kipps  
Title: NOVEL EXPRESSION VECTORS  
CONTAINING ACCESSORY MOLECULE  
LIGAND GENES AND THEIR USE FOR  
IMMUNOMODULATION AND  
TREATMENT OF MALIGNANCIES AND  
AUTOIMMUNE DISEASE  
Appl. No.: 08/982,272  
Appl. Filing Date: 12/01/1997  
Examiner: Phillip Gambel  
Art Unit: 1644

<b>CERTIFICATE OF FACSIMILE TRANSMISSION</b> I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.  Line Gauthier (Printed Name)  (Signature)  March 23, 2004 (Date of Deposit)
--

**REQUEST FOR CONTINUED EXAMINATION (RCE)**  
**TRANSMITTAL**

Mail Stop RCE  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

Enclosed are:

03/30/2004 NVILLARI 00000001 500873 00002273  
[X] Amendment/Reply.

01 FC:2801 385.00 DA

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$770.00	= \$770.00
Total Claims:	15	- 20	= 0	x \$18.00	= \$0.00
Independents	1	- 3	= 0	x \$86.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$290.00	= \$0.00
CLAIMS FEE TOTAL:					= \$770.00
CLAIMS AND EXTENSION FEE TOTAL:					\$770.00
[ X ]	Small Entity Fees Apply (subtract 1/2 of above):				\$385.00
[ ]	Suspension of action requested under 37 C.F.R. § 1.103(c)				\$0.00
TOTAL FEE:					\$385.00

[ X ] Please charge Deposit Account No. 50-0872 in the amount of \$385.00. A duplicate copy of this transmittal is enclosed.

[ X ] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date 3-23-04

FOLEY & LARDNER LLP  
Customer Number: 30542  
Telephone: (858) 847-6720  
Facsimile: (858) 792-6773

Respectfully submitted,

By

*Stacy L. Taylor*

Stacy L. Taylor  
Attorney for Applicant  
Registration No. 34,842